



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E368559**

INTERSTATE <input type="checkbox"/>	CITY STREET <input type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION ☐

CASE # **14-02678**

LOCAL AGENCY CODING ☐

TOTAL # OF UNITS **02** OBJECT STRUCK ☐

M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY #
DATE OF COLLISION **10** - **26** - **2014** **2032** **31** N ☐ E ☐ IN ☒ OF **0664**
S ☐ W ☐

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐
STATE ROUTE **9 NE** BLOCK NO. ☒ **700**
MILE POST ☐

DISTANCE OF (REFERENCE OR CROSS STREET)
MILES ☐ N ☐ E ☐
FEET ☐ S ☐ W **STATE ROUTE 204**

UNIT 01 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE ☐

LAST NAME **WHITE** FIRST NAME **NICOLE** MIDDLE INITIAL **R**

STREET NEW ADDRESS **11719 23RD PLACE NE**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

GDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **WHITENR181L4** STATE **WA** SEX **F** D.O.B. **06** - **24** - **1982**

ON DUTY ☐ STATUS ☐ AIRBAG **6** RESTR. **8** EJECT **1** HELMET USE ☐ INJURY CLASS **1** NATURE OF INJURIES

LICENSE PLATE # **AQP0997** STATE **WA** VIN# **1D8HB48PX7FS77410**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2007** MAKE **DODG** MODEL **DURAN** STYLE **4W** VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **MICHAEL SICKLER 8506 14TH PLACE SE LAKE STEVENS WA 98258**

LIABILITY INSURANCE IN EFFECT ☒ INSURANCE CO & POLICY # **OREGON MUTUAL 737594** CHARGE ☐

UNIT 02 MOTOR VEHICLE ☒ PEDAL-CYCLE ☐ PEDESTRIAN ☐ PROPERTY OWNER ☐ DAMAGE THRESHOLD MET YES ☒ NO ☐ PHONE ☐

LAST NAME **JENNINGS** FIRST NAME **ANDREW** MIDDLE INITIAL **J**

STREET NEW ADDRESS **1021 89TH DRIVE NE**

CITY **LAKE STEVENS** ST **WA** ZIP **98258**

GDL ☐ RESTRICTIONS ☐ ENDORSEMENTS ☐

DRIVER'S LICENSE # **JENNIAJ460R2** STATE **WA** SEX **M** D.O.B. **12** - **22** - **1954**

ON DUTY ☐ STATUS ☐ AIRBAG **6** RESTR. **9** EJECT **1** HELMET USE ☐ INJURY CLASS **7** NATURE OF INJURIES **CHEST PAIN**

LICENSE PLATE # **AMB3426** STATE **WA** VIN# **1MEFM6539YK612880**

TRAILER PLATE # ☐ STATE ☐ TRAILER PLATE # ☐ STATE ☐

VEH. YEAR **2000** MAKE **MERC** MODEL **MYSTIC** STYLE ☐ VEHICLE TOWED YES ☐ NO ☒ TOWED BY ☐ GOVT. VEHICLE YES ☐ NO ☒

REGISTERED OWNER INFO. **OWNED BY DRIVER**

LIABILITY INSURANCE IN EFFECT ☐ INSURANCE CO & POLICY # ☐ CHARGE ☐

OFFICER'S NAME (PRINT) **R. RUTHERFORD** BADGE OR ID # **130** AGENCY **WA0311900**



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E368559**

CASE # **14-02678**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		ROBINSON XAVIER M																	
ADDRESS & PHONE #		8506 14TH PLACE SE LAKE STEVENS WA 98258										SEX	M	D.O.B. MMDDYYYY	01	30	2009		
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	7	AIRBAG	6	RESTR.	8	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)		WHITE NALANIE																	
ADDRESS & PHONE #		8506 14TH PLACE SE LAKE STEVENS WA 98258										SEX	F	D.O.B. MMDDYYYY	11	28	2006		
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	1	SEAT POS.	9	AIRBAG	6	RESTR.	8	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES	NECK PAIN
NAME (LAST, FIRST, MIDDLE INITIAL)		GAITAN GARY D																	
ADDRESS & PHONE #		8421 19TH STREEN NE LAKE STEVENS WA 98258 3604032435										SEX	U	D.O.B. MMDDYYYY	03	24	1972		
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

10/26/2014 at 2032 hours, I heard SCSO Deputy McCullar advise he was out with a two vehicle collision at SR204 and SR9. I responded and contacted vehicle 1 driver (White) and Vehicle 2 driver (Jennings). White told me that she was headed S/B on SR9 with a green light. Driver 1 said she proceeded through the intersection and doesn't know where vehicle 2 came from before the collision. Driver 2 was yelling he was having chest pain. He was transported by aid. I contacted W) Stockham and W) Gaitan who both stated that vehicle 1 was stopped at a red light S/B on SR9 at SR204. Vehicle 1 started to proceed slowly through the intersection. Both witnesses stated that Vehicle 1 had a red light and vehicle 2 had a green left turn signal to go from N/B SR9 to W/B SR204. Driver of Vehicle 1 said that she looked down for just a moment.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

R. RUTHERFORD		10-26-14 10:59 PM			
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET		DATED	
APPROVED BY		DATE		PLACE SIGNED	
BOB SUMMERS 079		10/27/2014 10:51:03 PM			
BADGE OR ID #	130	ORI #	WA0311900	TIME POLICE DISPATCHED	8:32 PM
			TIME POLICE ARRIVED	8:33 PM	



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E368559**

CASE # **14-02678**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

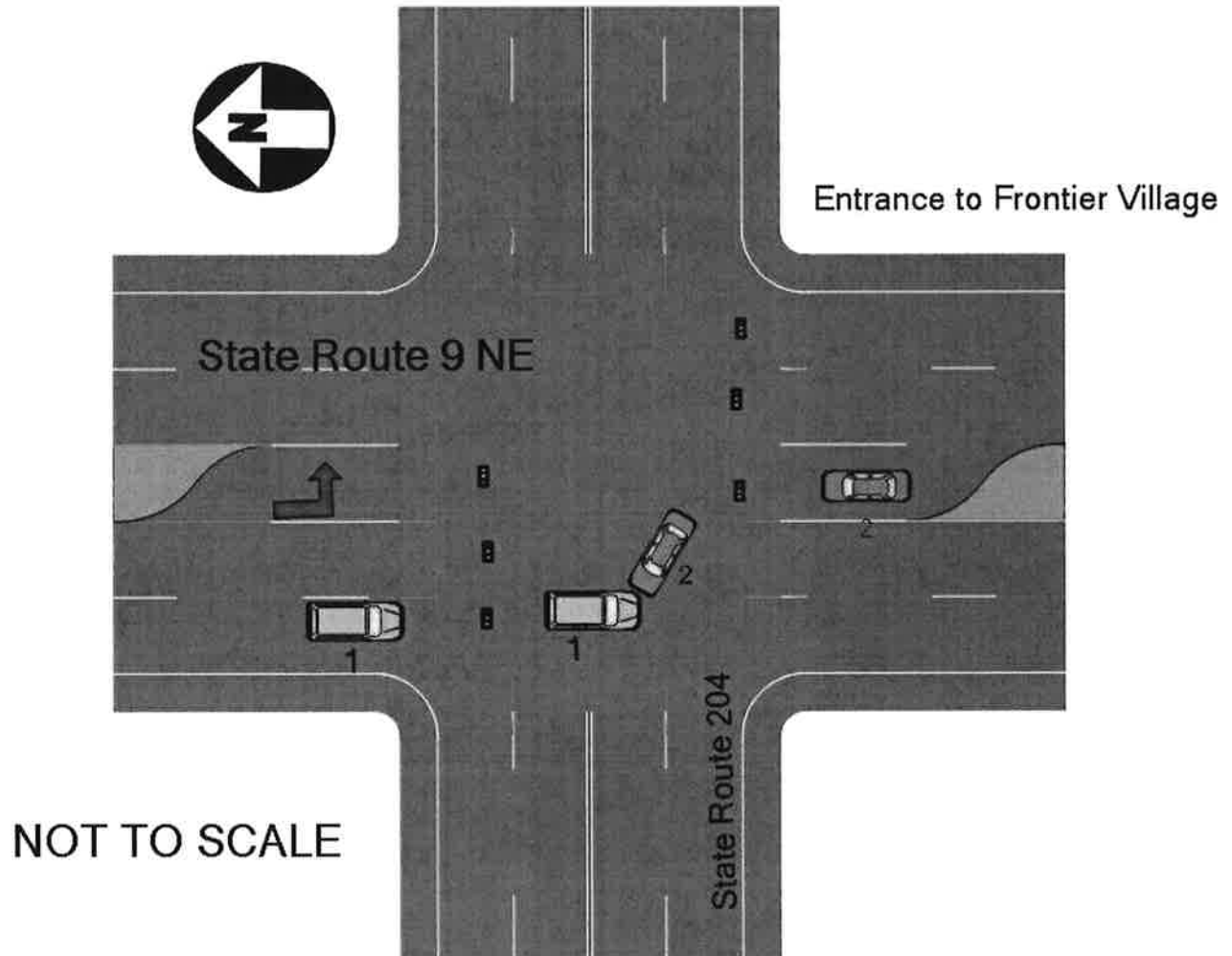
NAME (LAST, FIRST, MIDDLE INITIAL)		STOCKHAM STEVEN S																	
ADDRESS & PHONE #		1221 94TH DRIVE SE LAKE STEVENS WA 98258 4258708306																	
SEX		U		D.O.B.		MMDDYYYY		11		18		1985							
PASSENGER	<input type="checkbox"/>	WITNESS	<input checked="" type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY													
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
NAME (LAST, FIRST, MIDDLE INITIAL)																			
ADDRESS & PHONE #																			
SEX				D.O.B.		MMDDYYYY													
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	

NARRATIVE

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I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

R. RUTHERFORD		10-26-14 10:59 PM			
INVESTIGATING OFFICER'S SIGNATURE		UNIT OR DIST. DET		DATED	
APPROVED BY		DATE		PLACE SIGNED	
BOB SUMMERS 079		10/27/2014 10:51:03 PM			
BADGE OR ID #	130	ORI #	WA0311900	TIME POLICE DISPATCHED	8:32 PM
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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02678

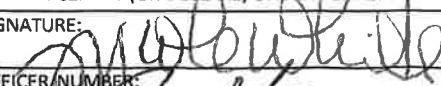

VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) white Nicole Renee	RACE W	ETH	SEX	DOB 06/24/82	AGE 32	HGT	WGT	HAIR	EYES
STREET ADDRESS 8506 14th Pl SE		CITY LK Stevens		STATE WA		ZIP 98058		RES. STATUS		
HOME PHONE		CELL PHONE 4253671141		PLACE OF EMPLOYMENT						
WORK PHONE		EMAIL ADDRESS nicolereneew@aim.com								

I, Nicole White, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY : (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was going south through intersection on green light looked down for a second in middle of intersection and slammed into car who I think pulled in front of me.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10/26/14	LOCATION SIGNED LK Stevens Police Station
OFFICER NUMBER: 	DATE SIGNED 10/26/14	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02678



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Stockham, Steven Shane	RACE C	ETH	SEX M	DOB 11-18-45	AGE 48	HGT 5'8"	WGT 180	HAIR BLK	EYES BLU
STREET ADDRESS 1221 94th Dr. SE		CITY Lake Stevens			STATE WA	ZIP 98258	RES. STATUS			
HOME PHONE		CELL PHONE 425-870-8306			PLACE OF EMPLOYMENT Big 5 - Marysville					
WORK PHONE		EMAIL ADDRESS SSSalien@yahoo.com								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

(SS) On 10-26-14 at approx 8:30pm I was ^{Southbound on} stopped at ^(SS) Hwy 9 intersection in Lake Stevens and stopped at Hwy 9 and Hwy 204 intersection behind a jeep wrangler (Looking) vehicle. Our light was red. The light for on coming traffic gave a green turn arrow and a car proceeded to turn left in front of us. The vehicle in front of me began to coast through our red light and hit the oncoming, turning vehicle on its passenger side. It appeared to coast as opposed to intentionally press the gas pedal to gain speed.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10-26-14	LOCATION SIGNED Hwy 9 / Hwy 204
OFFICER/NUMBER: 	DATE SIGNED 10-26-14	LOCATION SIGNED LAKE STEVENS

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

14-02678


VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Gautan Gary D	RACE White	ETH Hisp	SEX M	DOB 24 Mar 72	AGE 42	HGT 5'5"	WGT 190	HAIR Brn	EYES Blue
STREET ADDRESS 8821 14th St NE Lake		CITY Lake Stevens		STATE WA		ZIP 98258		RES. STATUS		
HOME PHONE		CELL PHONE 817 312 9732		PLACE OF EMPLOYMENT US Army						
WORK PHONE 362 403 2435		EMAIL ADDRESS Gary.D.Gautan.mil@mail.mil								

I, Gary Gautan, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was at a red light, at the corner of Highway 9 and SH 204, headed South bound (SB). I noticed the green left light turn light was lit. On my right side was a blue Dodge Durango. My light to go straight was still red and then the Durango started moving forward and did not stop. Then I noticed a gray car was making a left turn in front of the Durango and it wasn't stopping either. The gray car was turning to head west on Hwy 204. Neither vehicles attempted to stop or ~~swerve~~ swerve to miss each other. The Durango crashed into the right front side of the gray car. I moved my truck to the right side of the intersection turned on my hazards and stop to assist.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 10/26/14	LOCATION SIGNED LK Stevens
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE ___ OF ___

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE

CASE / EVIDENCE NUMBER

14-02678

TOW / IMPOUND
AND INVENTORY RECORD

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ DUI/PC IMPOUND WITH 12 HOUR HOLD
☐ DWLS IMPOUND WITH _____ DAY HOLD

- ☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM _____

- ☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

- ☐ CHECK INDICATES THE DRIVER IS DWLS AND IS THE REGISTERED OWNER. DRIVER WILL NEED A SEPARATE RELEASE FORM FROM THE COURT OR THE AGENCY ORDERING THE IMPOUND.

VEHICLE INFORMATION

VIN

1MEFMG539YK612880

LICENSE

AMB3426

STATE

WA

YEAR

00

MAKE

merc

MODEL

MYSTIQUE

MILEAGE

☐ Report of Sale

☐ Digital

STYLE

407

COLOR

Blue

DRIVER

NAME (LAST, FIRST, MI)

Same as LEGAL

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

DOB

REGISTERED OWNER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

PHONE

LEGAL OWNER

NAME (LAST, FIRST, MI)

Jennings, Andrew's

STREET ADDRESS

1021 89TH DR NE

CITY, STATE, ZIP CODE

Lake Stevens 98258

PHONE

16-2254

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 10/26/14 AT 2:00 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE

TO REMOVE THIS VEHICLE FROM

SR9 / SR204

(TOWING FIRM)

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE

Robert Tavelle

DOL TOW TRUCK NO.

SD24-3

DATE

10/26/14

EQUIPMENT

DAMAGE

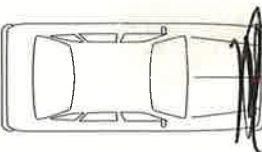
EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

- ☐ GLOVE BOX LOCKED
☐ KEYS []
☐ AUTO STEREO
☐ AUDIO TAPES / CD'S []
☐ CB RADIO
☐ RADAR DETECTOR
☐ TRUNK LOCKED
☐ SPARE TIRE
☐ JACK
☐ CHAINS
☐ OTHER _____

- ☐ FRONT
☐ R FRONT
☐ R SIDE
☐ R REAR
☐ L FRONT
☐ L SIDE
☐ L REAR
☐ REAR
☐ TOP
☐ UNDERCARRIAGE
☐ OTHER _____

SHADE DAMAGED AREA



INVENTORY/EVIDENCE

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

NOT INVENTORIED

Collision - Blocking

LSPD
ORIGINAL

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE

X [Signature]

Snithomish

BADGE NO.

130

DRIVER'S SIGNATURE CERTIFIES RECEIPT OF TOW/IMPOUND REPORT AND INFORMATION FOR DRIVERS TO REDEEM IMPOUNDED VEHICLE.

DRIVER'S SIGNATURE

X

3000-110-076 (R 7/11)

SUPERVISOR

CHECK ALL THAT APPLY:

UNIFORM WASHINGTON STATE TOW / IMPOUND AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

14-02678

- ☐ NON-IMPOUND / TOW
☐ AAA or OTHER ROADSIDE ASSISTANCE
☐ EVIDENCE
☐ SEIZED UNDER RCW 69.50.505
☒ IMPOUND ONLY
☐ IMPOUND WITH _____ DAY HOLD
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.
☐ REGISTERED OWNER MAY REDEEM.

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS THE REGISTERED OWNER. THEY WILL NEED A SEPARATE RELEASE FORM FROM THE COURT.

VEHICLE INFORMATION

VIN

1D8B17B48PX71E577410

LICENSE

A990997

STATE

WA

YEAR

07

MAKE

DOD

MODEL

DURANGO

MILEAGE

STYLE

SUV

COLOR

GRAY

☐ Report of Sale

DRIVER

NAME (LAST, FIRST, MI)

WATSE, Nicole R

STREET ADDRESS

1119 23RD AVE

CITY, STATE, ZIP CODE

LAKE STEVENS 98258

DOB

062482

REGISTERED OWNER

NAME (LAST, FIRST, MI)

WASH STECU.

STREET ADDRESS

PO BOX WSECW

CITY, STATE, ZIP CODE

Olympia 98507

DOB

LEGAL OWNER

NAME (LAST, FIRST, MI)

Exxier, Michael D

STREET ADDRESS

8506 14th PL SE

CITY, STATE, ZIP CODE

LAKE STEVENS 98258

DOB

AUTHORIZATION AND RECEIPT

ON THIS DATE OF 07/26/14 AT 2100 (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE

ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE ANGEL TOWING (TOWING FIRM)

TO REMOVE THIS VEHICLE FROM SR9 / SR204

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE [Signature]DOL TOW TRUCK NO. 5024-5DATE 10-26-14

EQUIPMENT

DAMAGE

EVIDENCE (DRIVER'S SIDE)

EVIDENCE (PASSENGER'S SIDE)

☐ GLOVE BOX LOCKED

☐ KEYS []

☐ AUTO STEREO

☐ AUDIO TAPES / CD'S []

☐ CB RADIO

☐ RADAR DETECTOR

☐ TRUNK LOCKED

☐ SPARE TIRE

☐ JACK

☐ CHAINS

☐ OTHER

☐ FRONT

SHADE DAMAGED AREA

☐ R FRONT

☐ R SIDE

☐ R REAR

☐ L FRONT

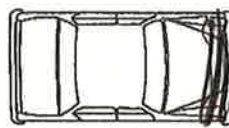
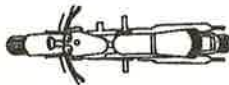
☐ L SIDE

☐ L REAR

☐ REAR

☐ TOP

☐ UNDERCARRIAGE

☐ OTHER


INVENTORY

NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

NOT INVENTORIED

Collision - Blocking

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE X

Rutherford

Shohomish

BADGE NO.

130

3000-110-076 R 12/04

COUNTY, WA

SUPERVISOR

LAKE STEVENS POLICE EVIDENCE UNIT	Primary Officer/Badge Number <i>Rutherford #130</i>	Case Number <i>14-02678</i>
Type of Crime: <u>Felony / Misdemeanor (Circle)</u>	Type of Case: <i>Collision</i>	Date/Time: <i>10/26/14</i>

Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING

*Evi will be held until court dispo or when the Statute of Limitations has expired
*Found and Sftg will be held for 60 days or 60 days past owner notification

Case #	Item # <i>1</i>	Item <i>AD</i>	Brand Name <i>COMPASSION</i>	Storage Location	Disposition
	Action # <i>3</i>	Brand/Model/Caliber <i>Collision Pcs</i>			
		Serial #	Where Found	Weight of Narcotic	
	Owner's Name Address City State Zip Phone #				Barcode goes here
	Owner Signature/Other remarks /additional information/ special instructions				
	Item #	Item	Brand Name	Storage Location	Disposition
		Brand/Model/Caliber (Further Description)			
		Serial #	Where Found	Weight of Narcotic	
	Owner's Name Address City State Zip Phone #				Barcode goes here
	Owner Signature/Other remarks /additional information/ special instructions				
	Item #	Item	Brand Name	Storage Location	Disposition
		Brand/Model/Caliber (Further Description)			
		Serial #	Where Found	Weight of Narcotic	
	Owner's Name Address City State Zip Phone #				Barcode goes here
	Owner Signature/Other remarks /additional information/ special instructions				
	Item #	Item	Brand Name	Storage Location	Disposition
		Brand/Model/Caliber (Further Description)			
		Serial #	Where Found	Weight of Narcotic	
	Owner's Name Address City State Zip Phone #				Barcode goes here
	Owner Signature/Other remarks /additional information/ special instructions				
	Item #	Item	Brand Name	Storage Location	Disposition
		Brand/Model/Caliber (Further Description)			
		Serial #	Where Found	Weight of Narcotic	
	Owner's Name Address City State Zip Phone #				Barcode goes here
	Owner Signature/Other remarks /additional information/ special instructions				

Evidence Control Use Only:

Received by Evidence:	NCIC/WACIC <input checked="" type="checkbox"/>	Date:	CAD/RMS Checked	ROUTING: _____
Name: _____ # _____	NCIC/WACIC +	Date:	Owner Letter Sent:	White: Property Room
Date: _____ Time: _____	NCIC/WACIC -	Date:	Owner Letter Sent:	Yellow: Case File

Incident History for: #SS14021315 Xref: #S014178016 #AG14003057

Case Numbers: \$SS14002678

Entered 10/26/14 20:32:30 BY SPDF25 SP0326

Dispatched 10/26/14 20:32:44 BY SPDP17 SP0380

Enroute 10/26/14 20:32:44

Onscene 10/26/14 20:33:16

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo:

Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: SR 204/SR 9 NE ,LKS (V)

Loc Info:

Name: WITN/OPDAHL, MARC

Addr:

Phone: 2068195351

/2032 (SP0326) ENTRY ,AC, 2 VEHS, UNK INJ' S, BLKING-
/2032 CROSS #AG14003057
/2032 (SP0380) DISPER 19N2 #SS130 RUTHERFORD, OFCR (RICH)
/2033 MISC 19N2 ,K921 ADV MALE CHEST PX
/2033 (SP0368) ASSTOS SOK922 #C1405 MCCULLAR, DEPUTY (BRANDON)
#C9045 K9 LIDAR (TRACKER)
/2033 (*****) REMINQ SOK922 AMB3426
/2033 (SP0368) REMINQ SOK922 LIC, K922, AMB3426, ,,
/2033 (SP0380) MISC 19N2 ,WILL NEED TRAFCON
/2033 (*****) REMINQ SOK922 AQP0997
/2033 (SP0368) REMINQ SOK922 LIC, K922, AQP0997, ,,
/2033 (SP0380) ASSTER 19S16 #SS72 AUKERMAN, OFFICER (WAYNE)
/2033 (SP0326) SUPP NAM: WITN/OPDAHL, MARC,
PHO: 2068195351,
TXT: DODGE DURANGO VS UNK OTHER
/2033 (SP0368) \$CROSS #S014178016
/2033 DUP #S014178016
/2033 (SP0326) SUPP TXT: RP ADVS SCSO JUST GOT OS
/2034 (SP0368) SUPP TXT: K922 ADV WILL NEED 2 TOWS, AND FOR AID,
59YO MALE CHEST PX
/2034 (*****) REMINQ 19N2 AMB3426
/2034 (SP0380) REMINQ 19N2 LIC, 19N2, AMB3426, ,,
/2034 (*****) REMINQ 19N2 AQP0997
/2034 (SP0380) REMINQ 19N2 LIC, 19N2, AQP0997, ,,
/2035 ONSCNE 19N2
/2035 SUPP TXT: 7 YOF COMPLAINING NECK PX
/2036 MISC 19N2 , AID OS
/2036 (SS72) *ONSCNE 19S16
/2037 (SP0380) ROTREQ 19N2 TOW 5024 LKS ANGEL TRANSPORT & TOWING
3605680918 , 2 TOWS FOR COL
/2038 MISC 19N2 , ANGEL TOW ER
/2039 (SS130) *MISC 19N2 , DURANGO WHITENICOLE R 062482. OREGON MUTUAL 737
594
/2041 (SP0195) SUPP TXT: ANGEL TOWING HAS 2 TOWS ENROUTE
/2041 SUPP TXT: ETA 20-25 MINS
/2051 (SS130) REMINQ 19N2 MDTWANT, WHITE, NICOLE, R, 062482, , , WA, , , , , , , , , , ,
/2054 (SP0380) ASNCAS 19N2 \$SS14002678
/2057 MISC 19N2 , ETA 2
/2104 ASSTOS 19N1 [SR 204/SR 9 NE , LKS]
#SS131 WELLS, OFCR (CHAD)
/2105 CLEAR SOK922
/2107 (SS130) REMINQ 19N2 MDTWANT, , , , , , WA, JENNIAJ460R2, , , , , , X, , , , ,
/2109 (SP0380) CLEAR 19N1 , 204 IS OPEN
/2110 (SS72) CLEAR 19S16

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/2120	(SP0380)	CHGLOC	19N2	[PROV]
				, CONTACT DRIVER
/2136	(SS130)	*ONSCNE	19N2	
/2145	(SP0380)	CHGLOC	19N2	[PD]
/2201	(SS130)	*ONSCNE	19N2	

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